
Lab Dept: Chemistry

Test Name: DRUGS OF ABUSE SCREEN, URINE

General Information

Lab Order Codes: ABUS

Synonyms: Urine drug screen

CPT Codes: 80307 – Drug test(s), presumptive, any number of drug classes, any number of devices or procedures, by instrument chemistry analyzers

CPT's vary: Confirmations may be added at the request of the provider at an additional charge, see confirmation links below.

Test Includes: Major metabolites of drugs of abuse (phencyclidine, benzodiazepines, cocaine metabolite, amphetamines, tetrahydrocannabinol, opiates, barbiturates) in urine.

Logistics

Test Indications: Useful for the qualitative determination of the presence of the major metabolites of drugs of abuse in urine.

Lab Testing Sections: Chemistry

Phone Numbers: MIN Lab: 612-813-6280

STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 1 hour or STAT (30 minutes)

Special Instructions: Confirmatory testing, for positive screening results requires a separate order. Use Add To Order to request the specific confirmatory test.

Specimen

Specimen Type: Urine

Container: Polypropylene Urine Cup (Children's MN standard urine cup is acceptable)

Draw Volume: 10 mL (Pediatric Minimum: 4 mL, Absolute Minimum: 0.4 mL/400 uL) urine

Note: Collection of the Absolute Minimum volume **does not** permit confirmatory or repeat testing. MEDTOX requires 3 mL of urine for confirmatory testing.

Processed Volume: Same as Draw Volume

Collection: Freshly voided, random urine. No preservative.
DO NOT use polystyrene containers.
Store at 2-8 degrees C for up to 24 hours or while in transport from remote locations.

Special Processing: Lab Staff:
Store up to 24 hours at 2-8 degrees C if testing is delayed.
Centrifuge all specimens prior to testing.

Freeze remaining sample for 7 days if there are no orders or if the screen is positive.

Patient Preparation: None

Sample Rejection: Unlabeled or mislabeled specimen; adulterated specimen

Interpretive

Reference Range:

Negative		
This test differentiates between positive and negative specimens at the designated cut-off concentrations.		
Drug Name:	Cut-off concentration:	Confirmatory Test:
Phencyclidine:	25 ng/mL	PCCON
Benzodiazepines:	150 ng/mL	BECON
Amphetamines:	500 ng/mL	AMCON
Cocaine (Benzoylecgonine):	150 ng/mL	COCON
Tetrahydrocannabinol:	50 ng/mL	THCON
Opiates (Morphine):	100 ng/mL	OPCON
Barbiturates:	200 ng/mL	BACON

Critical Values:	Call any positive results
Limitations:	This test is a qualitative screening test. Confirm positive results by another method, such as GC/HPLC if indicated.
Methodology:	Single use, one step, rapid lateral flow immunoassay device
References:	Jacobs and DeMott (2001) Laboratory Test Handbook, 5 th edition, Lexi-Comp, Inc., Hudson, OH, p 788 Profile-V MEDTOX Scan Reader System Quick Reference Instructions, MEDTOX Diagnostics, Inc, Burlington, North Carolina, Rev 3/2018.
Updates:	4/27/2006: TCA (Tricyclic Antidepressants) are no longer part of this assay. 3/30/2009: Revised volume to include Pediatric Minimum. 5/11/2010: CPT update, previously reported as 80101. 2/8/2011: CPT update, quantity changed 1/3/2012: Test no longer includes TCA. 1/12/2015: CPT update 5/18/2015: CPT update 1/20/2016: CPT update 2/4/2016: CPT update 7/22/2016: pH criteria added 6/9/2017: CPT update. 9/27/2017: Updated lab processing. 4/3/2018: Updated specimen processing. 1/7/2020: New test method, updated sample volume, specimen preparation, cut off concentrations and references.